

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|-------------------|----------|--------|---------|
| FEE DETERMINATION | T.C.D. | | 7/20/99 |
| I.P.E. CLASSIFIER | | 61581 | B-5075 |
| FINALITY REVIEW | | | |

INDEX OF CLAIMS

BEST AVAILABLE COPY

- (Through numeral)... Rejected
 + (Through numeral)... Allowed
 - (Through numeral)... Canceled
 + (Through numeral)... Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | | 7/20/99 | |
| 2 | | 11/20/99 | |
| 3 | | 8/20/99 | |
| 4 | | 2/4/00 | |
| 5 | | 10/20/99 | |
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| Claim | Final | Original | Date |
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| 52 | | 11/20/99 | |
| 53 | | 8/20/99 | |
| 54 | | 2/4/00 | |
| 55 | | 10/20/99 | |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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